



# *The Insider*

[www.senate.mi.gov/switalski](http://www.senate.mi.gov/switalski)

## **Inside State Politics with State Senator Mickey Switalski Senate District 10**

**March 8, 2004**

Welcome to the electronic version of *The Insider*. I would like to take the opportunity to thank you for your support and for giving me an opportunity to represent you in the Michigan Senate. It is my sincere hope that this bi-weekly e-newsletter will keep you informed of the happenings in Lansing, while keeping true to the traditional style of *The Insider*. If you would like to contact me, please feel free to e-mail me at [senmswitalski@senate.michigan.gov](mailto:senmswitalski@senate.michigan.gov) or call me at my Roseville or Lansing office. You can also meet me in person during my constituent hours, coming to a library near you. Call my office and make an appointment, or you can just walk in. See page 5 for the schedule.

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### **Mickey's Corner**

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## **Code Red in the Emergency Room**

I don't like going to the doctor's.

But I wanted to understand the problems in health care, so I decided to spend some time with doctors in hospital emergency rooms. Most sane people wouldn't willingly spend time there, but I figured that was part of the job you elected me to do. Just like visiting prisons.

You don't want to go there, either.

With the cooperation of St. John's, Beaumont, and Detroit Medical Center (DMC), I arranged to spend 3 Friday nights, from 10 pm to Midnight, with the staff in the Emergency Rooms of each hospital. I began Halloween Night, after the trick or treating was over and my son was in bed. I figured if I survived the first two without passing out, I would work my way up to Detroit Receiving, which I did in February.

I suppose if I was really dedicated, I'd have made my visits on nights with a full moon between 1 and 3 am after the bars close. But even *my* curiosity and desire to serve the public has its limits.

Anyway, I started out at St. John's Hospital on Halloween night. There was a lot of action. I saw things that made me appreciate what doctors and nurses and staff have to go through every day. Later, I got the suburban perspective by visiting Troy Beaumont, and concluded with visits to Hutzel Women's Hospital, Children's Hospital, and Detroit Receiving, all part of the DMC.

It was an education I won't forget.

The Attending Physicians run the Emergency Rooms. The ones I met had the patience of Job. The men and women I spent time with kept their heads when all about them were losing theirs. They were well organized, and utilized state of the art technology to fight illnesses. I watched in wonder as doctors at Beaumont monitored a screen with real time results of blood tests and MRI images as we searched a patient's internal organs for a kidney stone.

I saw a baby born 15 weeks premature at Hutzell, just over a pound, with a head the size of an apricot. She was on a ventilator in an incubator and was being cared for by a dedicated and loving staff. And there were 14 more like her.

I saw great teamwork.

The physician at St. John's introduced me to a bright young woman who was the resident, one of the graduate medical students who work long hours for relatively low pay and keep the system working. She ran through the case histories of about 8 patients in each successive cubicle and her diagnosis of each. The attending physician gave her feedback on each case and then followed up personally, beginning with the most difficult cases. They made an impressive pair.

It can get wild at times.

Just when I was getting comfortable an ambulance radioed ahead with a critical case. An elderly woman had a window shattered onto her as she lay in bed. She was breathing with great difficulty, and had a Do Not Resuscitate (DNR) order.

A team of six doctors, nurses and respiratory specialists prepared quickly for her arrival, all the while trying to determine what to do about the DNR order. Was it verbal or written? Was it properly executed? Would a family member be present? These tough questions would have to be answered in minutes.

And you see all kinds of things. Prisoner care is provided at Receiving, and it's routine to see policemen and prisoners in emergency. At St. John's I met a cop waiting there to question a woman who had been set on fire by some trick or treaters.

Even the patients can be difficult.

One man with a substance abuse problem and a plastic neck brace on was shouting that he wanted someone to get him the #&\*@ out of there. The attending physician went over and quietly calmed him down. He explained to him why they needed him to lie still for a while to get lab results on his condition. He relaxed, and said he understood and thanked the doctor. Before the doctor had taken three steps away from him he was up again, shouting to be released.

Once we were called to the front desk to answer a complaint. One of the men in the waiting room had grown impatient. He'd gone outside for a smoke. In the meantime he had been called, searched for, and couldn't be found. The staff went to the next patient. He returned later and became irate. He punctuated his dissatisfaction by smashing a pumpkin in the lobby, and left again.

You see things that are wrong with our society, or that are inefficient, or that there are no easy answers to.

I saw an elderly couple, in their 80's, with no health insurance. They had no family doctor, so the emergency room was their primary care provider. The wife was in because she was listless and not responding. She and her husband can't drive, so they arrived by ambulance, which is expensive. Her condition is chronic, meaning it's not really going to change. She was dehydrated and suffering from

malnutrition. The staff made her comfortable and put her on an IV drip. Her husband sat silently by her bedside. They would go home, again by ambulance, in a few hours. They had been in the week before for the same problem.

This surely isn't the most efficient way to deliver health care services. Emergency Room care is expensive because it is there, 24/7. But the elderly couple didn't seem to have an alternative.

"That isn't especially burdensome," a doctor explained. "We're already here, set up to provide care, and we can prioritize cases. If someone with a chronic problem has to wait 15 minutes while we deal with a crisis, they usually accept that."

Far more frustrating is the case of another 80 year old. She was in the emergency room 10 days earlier because of an infection. She was treated, given a prescription for antibiotics, and sent home. When she went to the pharmacy, she couldn't afford the \$80 cost of the prescription. She didn't take the antibiotics, the infection grew worse, and she began vomiting with toxemia. This time she had to be admitted to the hospital.

Now she will receive the drugs as a hospital patient.

"We try to be very sensitive to our patients on fixed incomes with limited ability to pay," a resident told me. "We do our best with free samples, and try to prescribe the lowest cost alternatives. But there is only so much you can do."

These are difficult financial times for most hospitals. The DMC has particular challenges because 30 percent of their patients have no insurance and no money. By law the hospital must treat anyone who enters their doors, but they get no compensation for nearly a third of their patients. Another 30 percent are Medicaid patients, whose reimbursement rates are so low that hospitals lose money on most cases. The DMC is like the car salesman that put prices so low that *"I lose \$100 on every car I sell. But I make it up on volume."*

The DMC expects to lose \$52 million this year

Even with Medicare reimbursement rates at such a low level, there is a gaping hole in the state's Medicaid budget. Governor Granholm has proposed a 75 cent a pack cigarette tax increase to raise \$300 million to help fill that hole. I voted against the last increase, but this one is an especially tough vote. It's hard to see how hospitals with a disproportionate share of Medicaid patients would function without the Medicaid program. We could throw 200,000 more people off Medicaid, but besides being cruel, that would only increase DMC's totally uncompensated care.

Clearly, legislators opposed to the cigarette tax need to identify a solution to the \$450 million shortage.

Four years of financial stress have taken their toll on many medical services. The doctors at Children's Hospital mentioned some of the serious problems they have with untreated dental problems in children, and I recalled with consternation cuts we were forced to make in dental care for handicapped children in last year's budget.

I thought about recent proposals to cut funding subsidizing the wages of medical students and shuddered to think what the system would run like without them. We get a lot for our money.

One bargain I saw involved a man in a motorcycle jacket who got in a fight and was hit across his forehead with a metal bar. The sizeable gash was stitched together by a fourth year med student, who had a knack for sewing.

Perhaps he'd worked his way thru med school as a tailor. His patient was in remarkably good spirits for just having been bludgeoned. As soon as he'd finished, the student was asked if he wanted to try his hand at another. He happily agreed.

"We'll keep him busy all night," the attending physician winked at me.

In spite of the economic difficulties, all the hospitals provided excellent care delivered by conscientious employees. They even found ways to make lemonade from lemons. The attending physician at Receiving pointed out with pride that their trauma unit had unique advantages in being able to give some of the quickest and best care. Many of their patients come to them without insurance or their own physician. So the trauma unit isn't hamstrung by having to worry about getting HMO or insurance company approval or consulting with personal physicians. "We can diagnose you and complete surgery on you in a couple of hours," a surgeon joked.

"You'd better watch out," I warned the director. "The other hospitals will complain that the only reason you can see patients quicker is because you don't have to mess with insurance paperwork."

"We'd be happy to exchange payer mixes with those hospitals," he grinned. "We'll even put in a high speed copier to make an impression of those insurance cards."

We've had four years of surgery and multiple amputations on the state budget. No one can say we haven't done a lot of cutting. The state has 8000 fewer employees than we did in 2001, our employees work 2 hours every week without pay, and we let 150 prisoners out of jail in Macomb County the last 2 months of 2003. And we are still \$1 billion in debt.

We need to be careful.

Additional cuts to the health sector could pull the plug on our life support system.

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### **Mickey's TV Insider Show**

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Check out my TV Insider Show coming to a television station near you. Watch me interview local guests about politics, life, issues and concerns to our district.

#### **Sterling Heights**

Every Saturday and Sunday at 12:30 p.m.  
(Comcast Channel 5/WOW Channel 10)

#### **Utica**

Every Wednesday at 9 a.m.  
(Comcast Channel 5/WOW Channel 10)

#### **Clinton Township**

Various times/Check local TV listings  
(Comcast Channel 5/WOW Channel 10)

#### **Roseville**

Every other Tuesday at 6:05 p.m.  
(Comcast Channel 18)

\*Please note that Sterling Heights/Utica/Clinton Township will show the TV Insider Show on Comcast Channel 5 and Wide Open West Channel 10. Roseville can see the TV Insider Show on Comcast Channel 18.

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## Coffee Hours

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\*Please note that since the District Office is in Roseville, I do not have coffee hours in Roseville. I encourage you to visit the Roseville office. We even have a coffee pot. For those that wish to attend the coffee hours in Clinton Township, please note that I will be at the new Clinton-Macomb Public Library, located at the corner of Romeo Plank and Canal Road on April 26.

### **Sterling Heights/Utica**

**Apr. 5, May 3**

**7-9 P.M.**

Location: Sterling Heights Library  
(Utica and Dodge Park roads)

### **Clinton Township**

**Mar. 29, May 24**

Clinton Township Public Library  
35891 Gratiot, north of 15 Mile  
7-9 P.M.

**Apr. 26 (NOTE NEW LOCATION)**

Clinton-Macomb Public Library  
40900 Romeo Plank Road  
7-9 P.M.

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## Contact My Office

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### **District Office**

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